ALARM BELLS IN HEALTH POLICY: THE HIDDEN CHANGES IN BILL C-69

An Act To Implement Parts Of Canada's 2024 Budget

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NATURAL HEALTH PRODUCT PROTECTION ASSOCIATION
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Health Canada's latest attacks on your health rights.

Health Canada is:

1. **attacking the right of doctors, health care practitioners, and veterinarians to use drugs for off-label use;**

2. **preventing veterinary drugs from being sold to the public (no more veterinary ivermectin), and**

3. **removing essential safeguards to drugs (allowing fraudulent claims, adulteration, and manufacture under unsanitary conditions).**

Summary

- Bill C-69, the *Budget Implementation Act, 2024, No. 1* proposes extensive changes that expand Health Canada's regulatory powers over the off-label use of drugs and natural health products; particularly impacting medical doctors and natural health practitioners.

- Proposed changes will prevent the public from purchasing veterinary drugs for human use, impacting access to medications like ivermectin.

- Fines of up to $5 million per day and potential imprisonment for non-compliance with the new rules heighten risks for healthcare providers, including medical doctors.

- The Government of Canada has, once again, included changes to food and drug law in a Budget Bill—circumventing scrutiny by the Standing Committee on Health, and instead going through the Standing Committee on Finance, which lacks specific expertise in food and drug law.

- Proposed legislation could allow Health Canada to exempt foods and drugs from fundamental safety laws, potentially compromising consumer protection against fraud and adulteration.

- These changes could enable Health Canada to approve drugs based on partial data or decisions made by foreign regulatory authorities, potentially lowering safety standards.

- If these broad powers are given to Health Canada, it would be a huge regulatory overreach affecting the autonomy of healthcare practitioners and the rights of patients.

- The proposed changes infringe on provincial jurisdiction over health, which could lead to legal challenges and concerns about federal overreach in health policy.

Feedback Wanted

This Discussion Paper is the opinion of the author, Mr. Shawn Buckley. Although Mr. Buckley is the President of the Natural Health Product Protection Association (NHPPA), his opinion is not necessarily that of the NHPPA or of anyone connected with the NHPPA. As with all Discussion Papers published by NHPPA, we invite comments and feedback.

About Bill C-69, *the Budget Implementation Act, 2024, No. 1*

On May 2, 2024, Bill C-69, the *Budget Implementation Act 2024, No. 1* had its first reading in the House of Commons. The first reading of a Budget Bill, like any other bill, is a formal stage but does not involve any debate. During the first reading, the title and main objectives of the Bill are presented to the House of Commons. This first reading is primarily procedural and sets the stage for more detailed examination and debate in subsequent readings.

To be clear, these are <u>proposed</u> changes to the law. Bill C-69 is not yet law.

Health Canada is deliberately circumventing the Standing Committee on Health again—this should concern you.

In the 2023 Budget (Bill C-47), Health Canada snuck in key changes to the *Food and Drugs Act*. No one noticed until the bill passed, that sweeping changes—like increasing fines concerning natural health products from $5,000 to $5,000,000—were hidden in the Budget

Bill. These sweeping changes came about because the 2023 Budget Bill (Bill C-47) moved natural health products into the *therapeutic products* class of drugs in the *Food and Drugs Act*.

In the 2024 Budget, Health Canada is at it again.

They have added powers concerning *therapeutic products* that you need to be aware of. This time we are watching the Budget Bills so that we will not be surprised when one is introduced.

There are two things about the Health Canada actions you should voice concern to your Member of Parliament about.

1. You should voice concern about the Government putting non-budget changes to the food and drugs law in budget bills. They don't belong there and the public does not watch budget bills for changes to food and drugs law.

2. Proposed changes to food and drugs law in a budget bill do not go to the Standing Committee on Health after second reading. Budget bills go to the Standing Committee on Finance, which has no expertise in food and drug law. Food and drug law is of utmost importance to Canadians and changes to food and drug law should be scrutinized by the Standing Committee on Health.

Restricting off-label use and off-label advertising

This should be as much of a concern to medical doctors as it is to natural health practitioners.

Off-label use is where a drug is approved of by Health Canada for a specific condition (the on-label use), but then is prescribed or recommended by a health care practitioner for a different condition (off-label use). Off-label use is widespread for several reasons. For example, CADTH which bills itself as Canada's Drug Agency gives the following reasons:

> If a drug has not been authorized for a certain indication, this does not mean it doesn't work. There are many reasons your clinician might prescribe a drug off-label:

- When manufacturers get to the stage of testing a drug on patients (clinical trial), they do not often include elderly patients, children, and pregnant or nursing women, so prescribing in these groups is often off-label by necessity.

- The illness or disease being treated may be similar to the actual authorized indication. For example, a drug may be authorized for a certain stage of breast cancer but used off-label for bone cancer or a different stage of breast cancer.

- A clinician may have run out of all "on-label" (authorized) options for treating your illness or disease.

- In the treatment of rare diseases, there may be few or no other treatment options.

- New uses may be discovered for drugs that are already on the market but Health Canada has not yet authorized the new use (e.g., no manufacturers have submitted an application to Health Canada for authorization of the "new uses").

Up until now Health Canada has left off-label use alone. This has been because of our constitution which gives provinces jurisdiction over health[1]. Health Canada's jurisdiction in the *Food and Drugs Act* is an exercise of the federal government's jurisdiction over criminal law and extra-provincial trade and commerce. Health Canada's jurisdiction does not permit them to directly tell health care practitioners that they cannot use a drug for off-label use.

To stop off-label use by health care practitioners, Health Canada has put new powers into the 2024 Budget Bill.

The Budget Bill includes the following new powers:

> **Supplementary rules — therapeutic product**
>
> 30.01 (1) Subject to any regulations made under paragraph 30(1)(j.1) and if the Minister believes that the use of a therapeutic product, *other than the intended use*, may present a risk of injury to health, the Minister may, by order, establish rules in respect of the importation, sale, conditions of sale, advertising, manufacture,

[1]Provinces have jurisdiction over health because section 92 of *The British North America Act 1867* gives provinces jurisdiction over hospitals and over property and civil rights. It is for this reason that provinces regulate health care professionals and run hospitals.

preparation, preservation, packaging, labelling, storage or testing of the therapeutic product for the purpose of preventing, managing or controlling the risk of injury to health.

Promotion

30.01(2) For greater certainty, the Minister may, in the order, establish rules for the purpose of preventing the therapeutic product from being promoted for a use, other than the intended use, of a therapeutic product or preventing a use, other than the intended use, of a therapeutic product from being appealing.

Uncertainty

30.01(3) The Minister may make the order despite any uncertainty respecting the risk of injury to health that the use of the therapeutic product, other than the intended use, may present.

These changes will enable Health Canada to do the following:

- make strict rules to prevent the off-label use of drugs, including natural health products;

- to make these rules *without the need for good health outcomes*. Off-label use is prevalent because it leads to good health outcomes. Off-label use allows our health care professionals to use their best judgment to decide how to treat us. Health Canada can ban all off-label use without having to consider the risks of taking off-label use away;

- Health Canada can take off-label use away without actual evidence that the off-label use of the drug creates a risk, and without any regard for the health risks of taking off-label use away from doctors and other health care practitioners. There really is no meaningful threshold test for Health Canada to meet before taking an off-label drug away. This is because:

    - subsection 30.01(1) uses the test that off-label use "may present a risk of injury to health". All off-label use of a drug would meet this theoretical test of "may". This is a non-existent test, and

- subsection 30.01(3) undermines the "may" test further by stating "The Minister may make the order *despite any uncertainty respecting the risk of injury that the use of the therapeutic product, other than the intended use, may present"*.

- Health Canada can stop off-label advertising of all drugs, including natural health products. For example, truthful advertising of off-label uses of drugs by naturopathic doctors, such as for intravenous vitamin C treatments, can be prevented. Health Canada is getting another mechanism to censor truthful health information.

This empowers Health Canada to take off-label use away from doctors and other health care practitioners without any evidence of risk. There is no standard to meet. There is no need for a balanced risk analysis which would take into account the health risks of removing off-label use.

This is a game changer for all health care practitioners. It will dramatically reduce the scope of options available to treat you.

Taking this key treatment tool from doctors and other health care practitioners who are the experts on treating us and keeping us alive is going to have dramatic negative health consequences. **This is a life-and-death change.**

The censorship aspect of this new power needs to be emphasized.

Subsection 30.01(2) enables the Minister to make rules to prevent a drug from being promoted for an off-label use. **This is about censorship.**

During the COVID-19 event, some doctors who spoke about Ivermectin as a treatment for COVID were professionally disciplined. But non-doctors were free to speak about Ivermectin. Now, if we were in a pandemic, the government would have a new tool to silence any promotion of an existing drug as a treatment. Doctors and non-doctors can be fined up to $5,000,000 a day for speaking out. They can be jailed. They can be truthfully saying that the off-label use of a drug will help people. The truth of the statement would not be a defence.

This is poor public policy. In a crisis, we learn by trial and error to find out what are the best treatment options. Criminalizing the promotion of off-label use of drugs will not lead to good health outcomes. Government censorship always leads to death, particularly when the censorship is in the area of health.

Doctors and other health practitioners will not be able to resist restrictions on off-label use—the penalties are too high.

The changes Health Canada snuck into the 2023 Budget Bill made all drugs, including natural health products, a class of drugs called "therapeutic products".

Changes in the 2024 Budget Bill (Bill C-69) make these new orders, such as orders preventing off-label use, subject to the therapeutic product penalty provisions of the Act.[2]

This means that any medical doctor or other health care practitioner could be subject to the following penalties for violating an order prohibiting off-label use for a drug:

- $5,000,000 a day fines, and/or
- two years of jail.

Two Veterinary Drug Changes

(1) Closing the veterinary loophole to prevent people from purchasing veterinary drugs such as ivermectin when the human version is blocked by the government, and (2) stopping off-label use for veterinary use.

Currently, humans can purchase veterinary drugs for human use. We know from the mainstream media during the COVID event that people were accessing veterinary ivermectin. Although ivermectin is a Nobel-prize-winning human drug, it was described as "horse paste" in the media. Some also purchase veterinary drugs for human use because they are cheaper and more available, such as topical iodine disinfectant.

Health Canada is giving itself broad powers to: (1) ensure that no human can access a veterinary drug, and (2) to prevent off-label use for veterinary drugs.
If Bill C-69 passes the following will be added to the *Food and Drugs Act*:

[2]The new section 30.07 makes it clear these new orders are to be deemed to be "regulations" for most sections of the Act. As "regulations" they are subject to the therapeutic product penalties found in s. 31.2 of the *Food and Drugs Act*.

Supplementary rules — drug intended for animal

30.02 (1) Subject to any regulations made under paragraph 30(1)(j.1) and if the Minister believes that the use of a drug intended for an animal of a particular species, including a use other than the intended use, may present a risk of adverse effects to human beings, animals of a different species or the environment, the Minister may, by order, establish rules in respect of the importation, sale, conditions of sale, advertising, manufacture, preparation, preservation, packaging, labelling, storage or testing of the drug for the purpose of preventing, managing or controlling the risk of adverse effects.

30.02(2) The Minister may make the order despite any uncertainty respecting the risk of adverse effects that the use of the drug, including a use other than the intended use, may present.

These new powers will give Health Canada the ability to:

- prevent the sale of veterinary drugs for human use (there will be strict rules to verify the use will be for animals);

- to prevent off-label use for animals.

As with human drugs, taking away the ability of veterinarians to use veterinary drugs for off-label use will have negative health consequences.

Preventing humans from accessing veterinary drugs is a further loss of freedom.

Although the section is written to appear that there is a "test" for the Minister to meet, it is a blank cheque power without any real test. The words used are:

30.02(1)...may present a risk of adverse effects to human beings, animals of a different species or the environment...

30.02(2) The Minister may make the order despite any uncertainty respecting the risk of adverse effects that the use of the drug, including a use other than the intended use, may present.

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More Health Canada Powers

Health Canada is giving itself the power to exempt food and drugs from key and vital safety provisions

Health Canada is giving itself the power to completely undermine the basic safety provisions of the *Food and Drugs Act* and Regulations.

Health Canada is trying to add the following provisions to the *Food and Drugs Act*:

> 30.05 (1) Subject to subsection (2) and any regulations made under paragraph 30(1)(j.1), the Minister may, by order, on any conditions that the Minister considers necessary, exempt — other than in relation to cosmetics — a class of foods, therapeutic products, persons or activities from the application of all or any of the provisions of Part I, section 37 or the regulations.
>
> 30.05(1.1) Subject to subsection (2) and any regulations made under paragraph 30(1)(j.1), the Minister may, by order, on any conditions that the Minister considers necessary, exempt a person — or any food, therapeutic product or activity, or any class of foods, therapeutic products or activities, in relation to a person — from the application of all or any of the provisions of Part I, section 37 or the regulations. The order cannot relate to cosmetics.

These provisions allow Health Canada to exempt any food or drug, including natural health products, from key protections in our food and drugs law, namely:

- Part I of the *Food and Drugs Act*;
- section 37 of the *Food and Drugs Act*, and
- all of the *Food and Drugs Regulations*.

You need to understand what these sections cover.

Part I of the *Food and Drugs Act* has fundamental safety provisions that protect us against:

- fraud and misrepresentation about a food or drug;

- selling adulterated food and drugs;
- selling food or drugs that do not meet recognized standards for them;
- selling food or drugs made under unsanitary conditions, and
- selling banned Schedule F drugs.

This is similar to if there was a Bill before Parliament to exempt a group of persons against the *Criminal Code* provisions against fraud, administering a noxious thing, and criminal negligence.

How is it in the public interest to allow Health Canada to exempt foods and drugs from the fraud, adulteration, standards and unsanitary conditions sections of the *Food and Drugs Act*? These are basic and fundamental protections that Canadians expect.

Section 37 concerns the parts of the Act and Regulations that must be complied with to export food and drugs from Canada to other countries. Why would we be exempting exporters from basic safety laws?

The *Food and Drug Regulations* represent our collective wisdom concerning food and drugs. When we learn for example that a certain food colouring is only safe below a specific amount, we put the safe amount into the Regulations. How is it in any way in the public interest for Health Canada to permit Canadians to ingest food and drugs that do not adhere to the lessons we have learned as minimum requirements to keep us safe?

Health Canada can exempt food and drugs from these essential safety laws without meeting any real test.

Health Canada can exempt any food or drugs from these essential safety laws without meeting any real test. Subsection 30.05(2) provides:

> 30.05(2) (2) The Minister may make an order under subsection (1) or (1.1) only if the Minister believes that
>
> a) it is necessary for a health or safety purpose or is otherwise in the public interest; and
>
> b) having regard to its benefits and conditions, it is unlikely to result in
>
> i. unacceptable health, safety or, if applicable, environmental risks, or
>
> ii. an unacceptable degree of uncertainty respecting health, safety or, if applicable, environmental risks.

This is not a health test although it is dressed up to be a health test. The first part of the test reads:

> "it is necessary for a health or safety purpose".

This cannot be meaningful text. It must be that the words are included to make it look like it is a health test when it is not. We know this by using the words of the test to ask the simple rhetorical question;

> When is it "necessary for a health or safety purpose" to exempt a food or drug from:
>
> - the protection against fraud and misrepresentation;
> - the protection against adulteration with dangerous substances;
> - the protection against foods or drugs that do not meet standards from being sold;
> - the protection against being sold food and drugs made in unsanitary conditions;
> - the protection of food and drugs adhering to the safety lessons we have learned, often at great cost?

The clear and obvious answer to these questions is that it is never "necessary for a health or safety purpose" to exempt food and drugs from these basic protections.

This is not a health test, it is an undefined public interest test with no clear threshold for Health Canada to meet. The test again is:

> 30.05(2) (2) The Minister may make an order under subsection (1) or (1.1) only if the Minister believes that
>
> a) it is necessary for a health or safety purpose or is otherwise in the public interest; and
>
> b) having regard to its benefits and conditions, it is unlikely to result in
>
> i. unacceptable health, safety or, if applicable, environmental risks, or
>
> ii. an unacceptable degree of uncertainty respecting health, safety or, if applicable, environmental risks.

This is not a health test. Health Canada can exempt food and drugs from our safety laws if Health Canada determines:

- it is in the public interest (which can be any public interest economic, trade, environmental, political, etc.), and
- having regard to its benefits and conditions the exemption is unlikely to:
    - create an "unacceptable health, safety or, if applicable, environmental risks", or
    - an unacceptable degree of uncertainty respecting health, safety or, if applicable, environmental risks.

It is completely unclear how, having regard to the benefits and conditions of the exemption (the public interest), an unacceptable risk or degree of uncertainty will be determined. What is "unacceptable" to the Minister who is actively exempting food or drugs from fundamental safety laws?

Foods and drugs can be exempted from the law on the basis of "parts" of foreign documents

Another proposed addition to the *Food and Drugs Act* is to permit our food and drugs law to be circumvented by Health Canada by allowing Health Canada to rely on "parts" of documents produced by a foreign regulatory authority or other foreign entity.

Health Canada is seeking to add the following to the *Food and Drugs Act*

> 30.06 (1) Subject to subsection (2) and any regulations made under paragraph 30(1)(j.1), the Minister may, by order, deem that specified requirements of this Act or the regulations are met — in respect of a therapeutic product or food that belongs to a class specified in the order — on the basis of a decision of, or any information or document produced by, a foreign regulatory authority in respect of that therapeutic product or food.
>
> 30.06(2) The Minister may make the order only if the Minister believes that
>
> a) it is necessary for a health or safety purpose or is otherwise in the public interest; and
>
> b) having regard to its benefits and conditions, it is unlikely to result in
>
> i. unacceptable health, safety or, if applicable, environmental risks, or

ii. an unacceptable degree of uncertainty respecting health, safety or, if applicable, environmental risks.

30.06(3) The Minister may, in the order, impose any conditions that the Minister considers necessary.

30.06(4) Any person to whom a condition applies must comply with that condition.

30.06(5) For greater certainty,

a) the requirements referred to in subsection (1) include requirements imposed on the Minister;

b) the Minister may rely on a portion of a decision of, or a portion of any document or information produced by, a foreign regulatory authority; and

c) nothing in this section is intended to limit the Minister's ability to consider information, documents or other material obtained, directly or indirectly, from a foreign regulatory authority.

This is another new route for Health Canada to circumvent our food and drugs law. So, for example, to get a new vaccine approved, Health Canada can get a submission by the pharmaceutical company for approval, ignore all the danger data (as these new changes allow Health Canada to only consider "a portion" of the information) and approve the drug. Similarly, Health Canada could exempt a food or drug from any part of our food and drug laws meant to protect us based on "parts" of foreign documents. Ironically, we could have a foreign regulator reject access to a food or drug in their country and yet Health Canada could rely on the information given to the foreign regulator to approve the food or drug for Canada.

We again have a test that is not a health test, it is an undefined public interest test with no clear threshold for Health Canada to meet. The test again is:

30.05(2) (2) The Minister may make an order under subsection (1) or (1.1) only if the Minister believes that:

a) it is necessary for a health or safety purpose or is otherwise in the public interest; and

b) having regard to its benefits and conditions, it is unlikely to result in

i. unacceptable health, safety or, if applicable, environmental risks, or

ii. an unacceptable degree of uncertainty respecting health, safety or, if applicable, environmental risks.

This is not a health test. Health Canada can exempt food and drugs from our safety laws if Health Canada determines:

- it is in the public interest (which can be any public interest economic, trade, environmental, political, etc.), and
- having regard to its benefits and conditions the exemption is unlikely to:
    - create an "unacceptable health, safety or, if applicable, environmental risks", or
    - an unacceptable degree of uncertainty respecting health, safety or, if applicable, environmental risks.

It is completely unclear how, having regard to the benefits and conditions of the exemption (the public interest), an unacceptable risk or degree of uncertainty will be determined. What is "unacceptable" to the Minister who is actively exempting food or drugs from fundamental safety laws?

The above reliance on foreign regulatory authorities includes extra-governmental authorities such as the World Health Organization

The changes add the following definition to the *Food and Drugs Act*:

> **foreign regulatory authority** means a government agency *or other entity outside Canada that controls the manufacture, use or sale of therapeutic products or foods within its jurisdiction*;

So, the entity whose documents and decisions can be used to exempt food and drugs from our food and drugs law does not have to be the "foreign regulatory authority" of a country. It can be an "other entity outside of Canada that controls the manufacture, use or sale of therapeutic products or foods within **its jurisdiction**". This would appear to include extra-governmental organizations which have jurisdiction due to agreements with other countries (even if Canada is not part of such agreements).

This would certainly apply to the World Health Organization which I understand accepts funding from the pharmaceutical industry and the Bill and Melinda Gates Foundation.

These proposed changes are literally unbelievable and unexplainable

Author's Comments

Off-label use

It is a major change for Health Canada to interfere with the rights of health care practitioners to recommend drugs and natural health products for off-label use. This is an area of provincial jurisdiction. There is no regulatory gap needing to be filled by Health Canada. There is no problem to be fixed.

Health Canada has no expertise in making health decisions for patients. Off-label use is a health decision made by health care professionals concerning an individual patient's unique circumstances. These decisions are made as professional judgements to obtain the best health outcomes. Interfering with this will lead to poor health outcomes and further centralize the control of health policy with the federal government. There is no rational explanation for giving Health Canada the power to interfere with off-label use.

It is unacceptable for Health Canada to be given any supervision over off-label use.

It is criminally negligent to permit Health Canada to interfere with off-label use without any evidence of risk. As set out above, there is no risk threshold to interfere with off-label use.

Exempting food and drugs from basic and essential safety laws

It is literally unbelievable that the changes would allow food and drugs to be manufactured and sold:

- fraudulently;
- adulterated;
- when made in unsanitary conditions, and
- without complying with the safety lessons we have learned.

There is no rational explanation for these changes. It is literally unbelievable that they are being proposed.

The unrational possibility

The only way I could even remotely come up with a reason for the changes was to (1) group them together as a whole, and (2) apply them to our last health crisis.

All of the changes are so significant and have appeared without any public need for them that *it is reasonable to consider them as a whole, as a package of powers to address an anticipated future situation.* This is the only way I can make sense of them.

Together we have the following changes:

1. off-label use of drugs could be prohibited;

2. truthfully speaking about off-label use could be prohibited;

3. humans could not access veterinary drugs;

4. all the safety and approval requirements for the approval of a drug could be waived by Health Canada if it is in the public interest. A drug could be approved with fraud, adulteration, made in unsanitary conditions, and without safety and efficacy testing;

5. a drug can be deemed approved if it is approved by a foreign entity like the World Health Organization;

6. a drug can be deemed to be approved by Health Canada without a drug approval submission to Health Canada. Health Canada can rely on documents or "parts" of documents from a foreign entity like the World Health Organization.

The last major event we went through where all of these changes likely would have been employed by Health Canada was the COVID-19 pandemic. Using COVID-19 events as the example:

1. off-label use of existing drugs would be prohibited, which would prevent doctors from trying already approved drugs to treat the new virus. This would create a public interest need for a new vaccine (recall existing treatments like ivermectin were restricted for use for COVID-19);

2. the sharing of truthful information about off-label use would be criminalized. Doctors and non-doctors alike would be fined and jailed for truthfully speaking about off-label treatments such as ivermectin;

3. humans could not access veterinary drugs for off-label use ensuring there was a public interest for a new vaccine;

4. all the safety and approval requirements for the approval of a vaccine could be waived by Health Canada due to the public interest. A drug like a vaccine could be approved with fraud, adulteration (for example with DNA fragments, a problem

Health Canada admits happened with the COVID mRNA vaccines), made in unsanitary conditions (another problem with the COVID mRNA vaccines), and without safety and efficacy testing (the COVID mRNA vaccines were exempted from having to be proven safe or effective—see our Discussion Paper on the Test Changes To The Drug Approval Process from November 2021).

5. a vaccine could be deemed approved if it is approved by a foreign entity like the World Health Organization;

6. a vaccine could be deemed to be approved by Health Canada without a drug approval submission to Health Canada. Health Canada can rely on documents or "parts" of documents from a foreign entity like the World Health Organization.

Speculation is nothing more than speculation. This is, however, the only explanation I could come up with to give some rationale to the proposed changes.

What needs to be done!

Members of Parliament only act when there is great pressure on them. The NHPPA will be spearheading a campaign to create such pressure. To create pressure, we need you to:

1. Visit nhppa.org regularly to see what action plans are posted;

2. Subscribe to NHPPA's email community so you stay up-to-date on the latest actions.

3. Write to your MP about the issues covered in this Discussion Paper.

    a. Send an electronic letter now.

    b. Print a physical letter, add your own comments and mail it to your MP. You can enclose a copy of this Discussion Paper as well, if you're willing.

We need to apply enough pressure to our Members of Parliament that they <u>remove</u> these sections from Bill C-69 <u>before</u> they become law.

Resources

Bill C-69

Budget 2024

Food and Drugs Act